



SALES OF UNTAXED CIGARETTES TO INDIAN RETAILERS
OFFICE OF STATE TAX COMMISSIONER
SFN 23511

Name of Business	Business Address or Location
Owner's Name	Owner's Social Security Number
Owner's Address	Owner's Tribal Enrollment Number
City, State & Zip	

I certify that the information provided above is correct and that I have been granted authority from the _____ tribe to conduct sales of cigarettes within the boundaries of the _____ reservation.

Customer Signature	Date
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Deliveries of Untaxed Cigarettes

Date	Number of Cartons Delivered

See Instructions on Reverse Side

Instructions

The law which authorizes sale of untaxed cigarettes to Indian retailers located on Indian Reservations sets out strict requirements which must be met before sales may be made. The information requested on the front of this form must be completed before any sales may be made.

This form, when completed should be retained in the records of the North Dakota Wholesale Cigarette Distributor. **Do Not** send this form to the Office of State Tax Commissioner.

When all lines provided for listing of cigarette deliveries have been filled, a new form must be signed by the Indian retailer.

Do not use this form for sales of taxed cigarettes to non-Indian retailers.

To request additional forms, contact:

Office of State Tax Commissioner
600 E. Boulevard Ave. Dept. 127
Bismarck, North Dakota 58505-0599
Phone: 701-328-3475